### **Community Mental Health Affiliates**

**Employment Services** 

**Residential Services** 

Case Management

Recovery Support

Outpatient

Outpatient

Forensics Community-based

Medication Assisted Treatment

**Forensic MH** 

Addiction

New Britain, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Satisfied %

94%

93%

92%

91%

90%

89%

72%

66%

(Based on 451 FY21 Surveys)

Goal %

80%

80%

80%

80%

80%

80%

80%

80%

State Avg

93%

92%

91%

92%

91%

88%

83%

79%

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

### **Provider Activity Consumer Satisfaction Survey** Actual 1 Yr Ago Variance % Monthly Trend Measure Question Domain Satisfied % vs Goal% **Unique Clients** 2,949 2,787 6% Quality and Appropriateness Admits 2,154 1,908 13% Participation in Treatment Respect 2,201 1,847 19% 🔺 Discharges General Satisfaction Service Hours 64,273 6% 60,378 Overall Bed Days 25,589 24,824 3% Access 4,923 416 1083% S.Rehab/PHP/IOP Outcome Recovery > 10% Over 1 Yr Ago → > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type % **Mental Health** Outpatient 1,656 41.3% Crisis Services 527 13.1% Social Rehabilitation 243 6.1% Case Management 227 5.7% ACT 167 4.2% Community Support 149 3.7%

2.9%

2.2%

9.7%

7.1%

0.0%

2.4%

1.1%

0.5%

116

90

389

286

2

98

43

19

	Satisfie	d %	Goal %	0-80% 80-100%	✓ Goal I	Met	<b>U</b> nd	er Goal
			Client	Demographics				
Age	#	%	State Avg	Gender		#	%	State Avg
18-25	462	16%	10%	Male		1,501	51%	59%
26-34	595	20%	22%	Female		1,448	49%	41%
35-44	645	22%	23%	Transgender	•			0%
45-54	501	17%	18%					
55-64	508	17%	18%	_				
65+	215	7%	8%	Race		#	%	State Avg
				White/Caucasian		1,564	53%	61%
Ethnicity	#	%	State Avg	Other	•	741	25%	<b>13</b> %
Non-Hispanic	1,519	52%	<b>▼</b> 68%	Black/African American		452	15%	17%
Hisp-Puerto Rican	825	28%	<b>▲</b> 11%	Unknown	ļ	160	5%	6%
Unknown	427	14%	12%	Asian		19	1%	1%
Hispanic-Other	168	6%	9%	Am. Indian/Native Alaskan		9	0%	0%
Hispanic-Mexican	9	0%	1%	Hawaiian/Other Pacific Islander		3	0%	0%
Hispanic-Cuban	1	0%	0%	Multiple Races		1	0%	1%
r iispariic-cubari	1	0 70	0 70					
	Unique (	Clients	State Avg	▲ > 10% Over State Avg	<b>V</b> >	→ 10% L	Inder S	tate Avg

### **Adult OP - Torrington 603216**

Community Mental Health Affiliates

Mental Health - Outpatient - Standard Outpatient

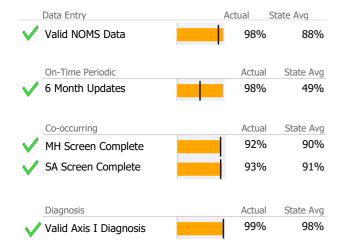
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	234	228	3%	
Admits	115	179	-36%	•
Discharges	110	105	5%	
Service Hours	2,542	3,363	-24%	•

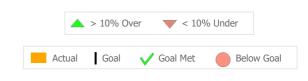
# **Data Submission Quality**



## Discharge Outcomes



Date	u	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	5													100%
Discharges	6													100%
Services														100%
		1 or n	nore Reco	rds Sub	mitted to	DMHA:	S							



<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 1,390 1,202 16% Treatment Completed Successfully 199 30% 50% 41% -20% 684 27% 🔺 Admits 538 Recovery 37% Discharges 654 478 National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 17,538 15,470 13% 1,212 84% 60% 62% 24% 🔺 Social Support 91% 95% 73% -4% 1,314 Stable Living Situation **Data Submission Quality Employed** 346 24% 30% 26% -6% Data Entry Actual State Avg Service Utilization Valid NOMS Data 97% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 777 99% 90% 84% 9% On-Time Periodic Actual State Avg 6 Month Updates 94% 49% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Co-occurring Actual State Avg Actual 95% 20% 91% 90% 2 or more Services within 30 days 627 75% 79% MH Screen Complete SA Screen Complete 92% 91% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis





<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

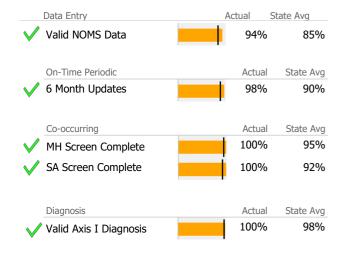
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

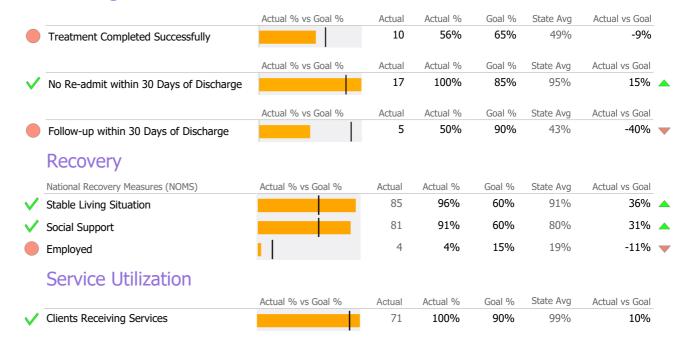
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	87	80	9%	
Admits	25	14	79%	•
Discharges	18	17	6%	
Service Hours	7,952	6,340	25%	•

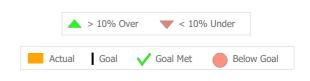
# **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 23 Active Assertive Community Treatment Programs

1 or more Records Submitted to DMHAS

\* State Avg based on 74 Active Standard Outpatient Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 24 32 -25% Treatment Completed Successfully 3 38% 50% 41% -12% 20 Admits 14 43% Recovery Discharges 8 29 -72% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 37 187 -80% 23 96% 60% 62% 36% 🔺 Social Support 19 79% 95% 73% -16% Stable Living Situation **Data Submission Quality** 3 **Employed** 12% 30% 26% -18% Data Entry Actual State Avg Service Utilization Valid NOMS Data 98% 88% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 6 38% 90% 84% -52% On-Time Periodic Actual State Avg 6 Month Updates 0% 49% Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Co-occurring Actual State Avg -65% -95% 90% 10% 75% 79% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 95% 91% State Avg Diagnosis Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 83% Discharges 58% ✓ Goal Met Actual Goal Below Goal 92% Services

### **BHH CHILDREN Program**

Community Mental Health Affiliates

Mental Health - Outpatient - Standard Outpatient

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	13	31	-58%	$\blacksquare$
Admits	1	6	-83%	•
Discharges	7	20	-65%	•
Service Hours	67	176	-62%	•

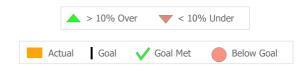
# **Data Submission Quality**

Data Entry	Ad	ctual S	State Avg
✓ Valid NOMS Data		99%	88%
On-Time Periodic		Actual	State Avg
6 Month Updates		0%	49%

## Discharge Outcomes







<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

## **Center for Employment Development**

Community Mental Health Affiliates

Mental Health - Employment Services - Employment Services

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	116	129	-10%	•
Admits	67	48	40%	•
Discharges	83	79	5%	
Service Hours	2,403	2,828	-15%	▼

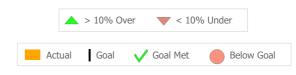
## Recovery

	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>V</b>	Employed		44	36%	35%	47%	1%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
1	Clients Receiving Services		40	100%	90%	96%	10%

## **Data Submission Quality**

Data Entry	Actual	State Avg
✓ Valid NOMS Data	99%	% 92%
On-Time Periodic	Actua	al State Avg
6 Month Updates	100%	% 88%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admission	S													100%
Discharge	S													100%
Services														100%
	1	L or mo	ore Recor	ds Subn	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 39 Active Employment Services Programs

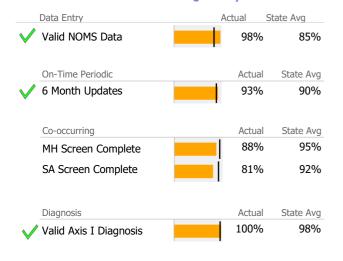
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

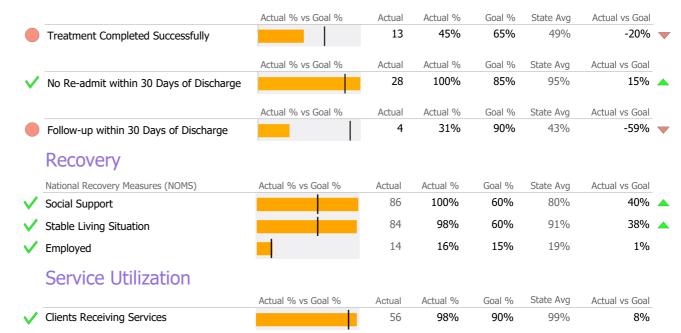
# **Program Activity**

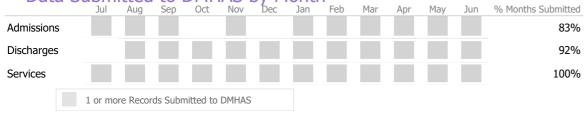
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	84	81	4%	
Admits	23	20	15%	•
Discharges	29	19	53%	•
Service Hours	5,101	7,287	-30%	•

# **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 23 Active Assertive Community Treatment Programs

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 17 11 55% 6 60% 60% 70% 0% Treatment Completed Successfully 10 150% Admits 4 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 150% Discharges 10 4 5 83% 90% 80% -7% Follow-up within 30 Days of Discharge **Bed Days** 3,083 2,991 3% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** 29% Social Support 16 89% 60% 84% Data Entry Actual State Avg 89% 95% 93% -6% 16 Stable Living Situation Valid NOMS Data 100% 80% 0 0% 25% 12% -25% **Employed** On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 67% 91% 12 Months Trend Avg LOS Beds Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 590 days 70% 90% -20% **T** 0.3 91% Co-occurring Actual State Avg 100% 98% MH Screen Complete >110% 90-110% < 90% SA Screen Complete 100% 89% Diagnosis State Avg Actual 94% 97% Valid Axis I Diagnosis Data Submitted to DMHAS by Month % Months Submitted > 10% Over < 10% Under</p> Admissions 67% Discharges 42% Actual Goal ✓ Goal Met Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 81 Active Supervised Apartments Programs

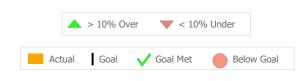
## **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	517	381	36%	•
Admits	535	433	24%	•
Discharges	502	403	25%	•

### **Crisis**



		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions														100%
Discharges														100%
	1	or mo	re Recor	ds Subm	nitted to	DMHAS								



<sup>\*</sup> State Avg based on 26 Active Mobile Crisis Team Programs

#### **Program Activity Discharge Outcomes** Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal Unique Clients 49 5 12% 50% 63% -38% Treatment Completed Successfully 52 Admits Recovery 41 Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 140 33 63% 60% 74% 3% Social Support 7 13% 20% 20% -7% **Employed Data Submission Quality** 18 35% -45% -Stable Living Situation 80% 78% Data Entry Actual State Avg Service Utilization Valid NOMS Data 78% 95% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 9 82% 90% 90% -8% On-Time Periodic Actual State Avg 6 Month Updates 100% 69%



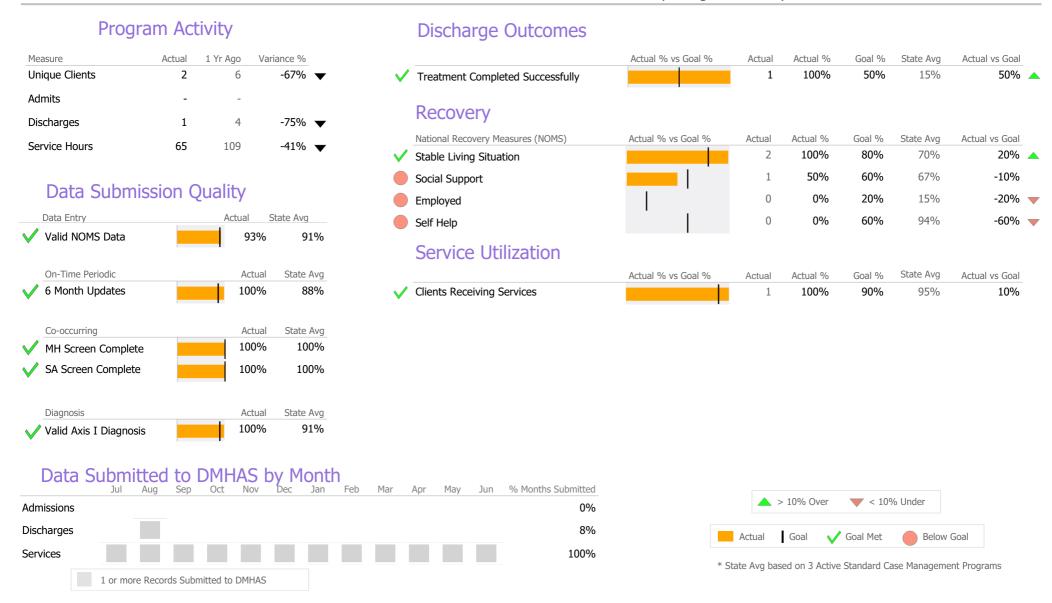


<sup>\*</sup> State Avg based on 31 Active Standard Case Management Programs

Forensic MH - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)



## **Crisis Services/ Respite Bed Program**

Community Mental Health Affiliates

Mental Health - Crisis Services - Respite Bed

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

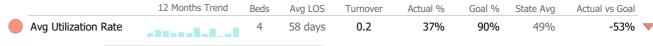
# Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	8	50% 🔺
Admits	11	8	38% ▲
Discharges	10	8	25% 🔺
Bed Days	539	587	-8%

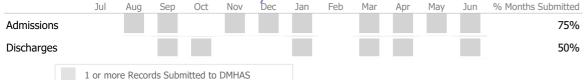
## Discharge Outcomes

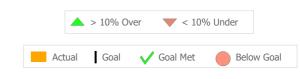


## **Bed Utilization**



< 90% 90-110% >110%





<sup>\*</sup> State Avg based on 10 Active Respite Bed Programs

## CSP/Recovery Pathways 603290, New Britain

Community Mental Health Affiliates

Mental Health - Community Support - CSP

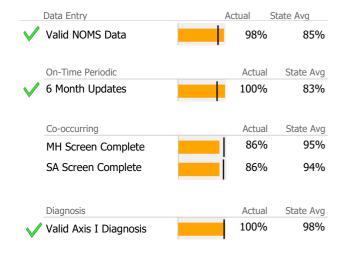
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

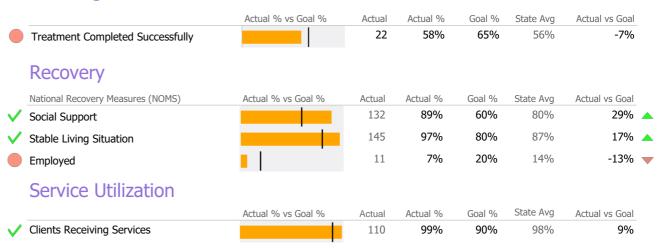
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	149	169	-12%	•
Admits	21	53	-60%	•
Discharges	38	41	-7%	
Service Hours	4,898	5,591	-12%	•

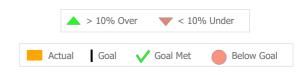
# **Data Submission Quality**



## Discharge Outcomes







<sup>\*</sup> State Avg based on 38 Active CSP Programs

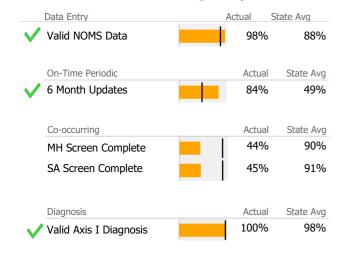
# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	55	18	206%	•
Admits	38	18	111%	•
Discharges	16	-		
Service Hours	2,013	518		

# **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 74 Active Standard Outpatient Programs

1 or more Records Submitted to DMHAS

\* State Avg based on 26 Active Group Home Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 14 12 17% Treatment Completed Successfully 2 100% 80% 62% 20% 🔺 3 2 50% 🔺 Admits Actual % vs Goal % Goal % State Avg Actual vs Goal Actual Actual % 2 100% Discharges 1 No Re-admit within 30 Days of Discharge 2 100% 85% 90% 15% Bed Davs 4,356 4,257 2% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 50% 90% 72% -40% **Data Submission Quality** Recovery Data Entry Actual State Avg National Recovery Measures (NOMS) Goal % Actual % vs Goal % Actual Actual % State Ava Actual vs Goal Valid NOMS Data 100% 99% 12 86% 60% 87% 26% Social Support 12 86% 90% 98% -4% Stable Living Situation On-Time Periodic Actual State Avg 6 Month Updates 82% 86% **Bed Utilization** Co-occurring Actual State Avg 12 Months Trend Avg LOS Turnover Actual % Goal % State Ava Actual vs Goal 100% 88% MH Screen Complete Avg Utilization Rate 1,076 days 0.2 149% 90% 93% 59% 🔺 SA Screen Complete 100% 95% < 90% 90-110% >110% Diagnosis State Avg Actual 64% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 17% Discharges 17% Actual Goal Goal Met Below Goal

#### **Program Activity Discharge Outcomes** Actual % Measure Actual 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 0% N/A N/A 50% 48% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 85 91 -7% 6 100% 75% 77% 25% 🔺 Not Arrested 67% 55% 42% 12% 4 Abstinence/Reduced Drug Use **Data Submission Quality** 5% Stable Living Situation 6 100% 95% 76% Data Entry Actual State Avg 3 33% 0% 50% 50% **Employed** Valid NOMS Data 100% 87% -43% 🔷 17% 60% 16% Self Help Valid TEDS Data 100% 84% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 0% 15% Clients Receiving Services 6 100% 90% 58% 10% Service Engagement Co-occurring Actual State Avg N/A 91% MH Screen Complete Outpatient Actual % vs Goal % Actual vs Goal Actual Actual % Goal % State Ava SA Screen Complete N/A 93% 0% 75% 63% -75% -2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Actual Goal Goal Met Below Goal Services 83% \* State Avg based on 117 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Unique Clients 14 15 -7% Treatment Completed Successfully 2 100% 60% 70% 40% 🔺 2 3 -33% 🔻 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 3 -33% 🔻 Discharges 50% 90% 80% -40% Follow-up within 30 Days of Discharge **Bed Days** 4,204 4,304 -2% Recovery National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Data Submission Quality** Social Support 13 93% 60% 84% 33% Data Entry Actual State Avg 95% 93% 5% 14 100% Stable Living Situation Valid NOMS Data 99% 80% 7% 25% 12% -18% **Employed** 1 On-Time Periodic Actual State Avg **Bed Utilization** 6 Month Updates 100% 91% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 96% 90% 1,080 days 0.3 91% 6% Co-occurring Actual State Avg 100% 98% MH Screen Complete 90-110% >110% < 90% SA Screen Complete 100% 89% Diagnosis State Avg Actual 100% 97% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Nov Mar May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 17% Discharges 17% Actual Goal ✓ Goal Met Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 81 Active Supervised Apartments Programs

1 or more Records Submitted to DMHAS

Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

\* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity** Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 123 95% 90% 76% 5% **Unique Clients** 334 345 -3% 142 195 -27% Admits 213 45% Discharges 147 Service Hours 1,332 960 39% 🔺 Jail Diversion Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg 0% 89% 🔺 51 89% 64% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 100% Goal Goal Met Below Goal Services 100%

### **Jail Diversion-Women 603342**

Community Mental Health Affiliates

1 or more Records Submitted to DMHAS

Discharges

Services

Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Goal

Goal Met

\* State Avg based on 19 Active Court Liaison-Jail Diversion Programs

Below Goal

#### **Program Activity** Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 34 97% 90% 76% 7% Unique Clients 82 99 -17% 55 42 31% 🔺 Admits 52 71 Discharges -27% Service Hours 1,630 1,462 12% Jail Diversion Actual % vs Goal % Actual % Goal % Actual vs Goal Actual State Avg 0% 88% 🔺 88% 64% Follow-up Service within 48 hours Data Submitted to DMHAS by Month Sep % Months Submitted Feb Mar Jun > 10% Over < 10% Under</p> Admissions 92%

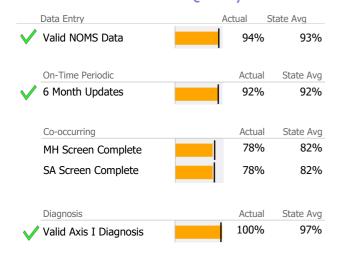
100%

100%

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	286	333	-14%	▼
Admits	149	167	-11%	•
Discharges	175	199	-12%	•
Service Hours	5,688	5,668	0%	

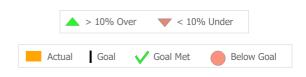
# **Data Submission Quality**



## **Discharge Outcomes**







<sup>\*</sup> State Avg based on 3 Active Standard Outpatient Programs

#### **Program Activity Discharge Outcomes** Variance % Actual % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 37 44 -16% 6 75% 50% 48% 25% 🔺 Treatment Completed Successfully 7 Admits **-43%** Recovery Discharges 8 11 -27% **T** National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 904 914 -1% 35 95% 75% 77% 20% 🔺 Not Arrested 27 73% 55% 42% 18% 🔺 Abstinence/Reduced Drug Use **Data Submission Quality** 34 Stable Living Situation 92% 95% 76% -3% Data Entry Actual State Avg 0 0% 50% 33% -50% **Employed** Valid NOMS Data 96% 87% -57% 3% 60% 16% Self Help Valid TEDS Data 100% 84% Service Utilization On-Time Periodic Actual State Avg Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 100% 15% Clients Receiving Services 29 100% 90% 58% 10% Service Engagement Co-occurring Actual State Avg 100% 91% MH Screen Complete Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal SA Screen Complete 88% 93% 25% 75% 63% -50% 2 or more Services within 30 days Diagnosis Actual State Avg 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar May Jun % Months Submitted Feb Apr > 10% Over < 10% Under</p> Admissions 33% 50% Discharges Actual Goal Goal Met Below Goal Services 100% \* State Avg based on 117 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

### **Living Free 2**

6 Month Updates

Community Mental Health Affiliates

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Unique Clients 18 60 **-70% ▼** Treatment Completed Successfully 14 78% 50% 63% 28% 🔺 2 Admits 31 -94% **T** Recovery 18 Discharges 46 -61% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 7 39% 20% 20% 19% 🔺 **Employed Data Submission Quality** 13 72% 60% 74% 12% 🔺 Social Support State Avg Data Entry Actual 78% -8% Stable Living Situation 13 72% 80% Valid NOMS Data 91% 95% On-Time Periodic State Avg Actual



69%

N/A



<sup>\*</sup> State Avg based on 31 Active Standard Case Management Programs

### **Living Free In Reach**

Community Mental Health Affiliates

Mental Health - Case Management - Standard Case Management

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal **Unique Clients** 19 65 -71% Treatment Completed Successfully 19 100% 50% 63% 50% 🔺 2 -95% 🔻 Admits 44 Recovery 19 Discharges 49 -61% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 0 0% 20% 20% -20% **Employed Data Submission Quality** 5 26% 60% 74% -34% Social Support Data Entry State Avg 5% -75% -Stable Living Situation 80% 78% Valid NOMS Data 70% 95% On-Time Periodic State Avg Actual 6 Month Updates N/A 69% Data Submitted to DMHAS by Month Sep Dec Mar Apr Mav % Months Submitted > 10% Over < 10% Under</p> Admissions 17% 8% Discharges Below Goal Actual Goal Goal Met 1 or more Records Submitted to DMHAS \* State Avg based on 31 Active Standard Case Management Programs

## **MACTT-Modified Assertive Community Treatment Team**

Community Mental Health Affiliates

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

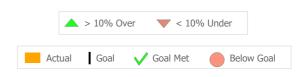
# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	75	87	-14%	•
Admits	40	36	11%	•
Discharges	37	51	-27%	•
Service Hours	1,051	1,649	-36%	•

# Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													83%
Services													100%
	1 or mo	ore Recor	ds Subn	nitted to	DMHAS	3							



<sup>\*</sup> State Avg based on 50 Active Outreach & Engagement Programs

### **MAT - Naltrexone - New Britain**

Community Mental Health Affiliates

Addiction - Medication Assisted Treatment - Naltrexone

# Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** State Avg Actual vs Goal Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Actual % Goal % **Unique Clients** N/A N/A 50% 45% N/A Treatment Completed Successfully Admits Recovery Discharges National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal N/A N/A 55% 65% -55% -Abstinence/Reduced Drug Use **Data Submission Quality** 50% 50% -50% N/A N/A **Employed** State Avg Data Entry Actual 90% -75% -Not Arrested N/A N/A 75% Valid NOMS Data N/A 96% 60% 35% -60% -N/A N/A Self Help Valid TEDS Data N/A 86% 95% 84% -95% -N/A N/A Stable Living Situation On-Time Periodic State Avg Actual 6 Month Updates N/A 35% Co-occurring Actual State Avg N/A 75% MH Screen Complete SA Screen Complete N/A 91% Data Submitted to DMHAS by Month Dec Mar Apr May Jun % Months Submitted > 10% Over < 10% Under</p> Admissions 0% 0% Discharges Goal Met Below Goal Actual Goal 1 or more Records Submitted to DMHAS \* State Avg based on 8 Active Naltrexone Programs

Discharges

1 or more Records Submitted to DMHAS

Services

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 98 92 7% 11 29% 50% 44% -21% Treatment Completed Successfully 25 Admits 14 79% Recovery 38 Discharges 20 90% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 1,842 Service Hours 1,307 -29% 94 96% 75% 68% 21% 🔺 Not Arrested 70 55% 44% 16% 🔺 71% Abstinence/Reduced Drug Use **Data Submission Quality** 87 -6% Stable Living Situation 89% 95% 64% Data Entry Actual State Avg 21 50% 23% -29% -21% **Employed** Valid NOMS Data 98% 92% 5 5% -55% -60% 16% Self Help Valid TEDS Data 100% 88% Service Utilization On-Time Periodic State Avg Actual Goal % State Avg Actual % vs Goal % Actual % Actual vs Goal Actual 6 Month Updates 98% 26% 59 Clients Receiving Services 97% 90% 38% 7% Co-occurring Actual State Avg 92% 75% MH Screen Complete SA Screen Complete 92% 93% Diagnosis Actual State Avg 100% 100% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted Apr Jun > 10% Over < 10% Under</p> Admissions 83%

92%

100%

Actual

Goal

✓ Goal Met

\* State Avg based on 22 Active Buprenorphine Maintenance Programs

Below Goal

### **Next Steps 603551**

Community Mental Health Affiliates

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Goal %

State Avg

Actual vs Goal

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

Actual %

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	20	35%	•
Admits	9	-		
Discharges	11	2	450%	•
Service Hours	245	257	-5%	

## Recovery

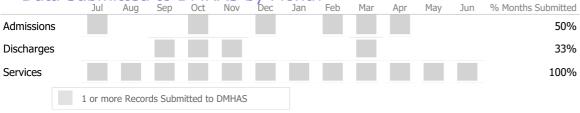
National Recovery Measures (NOMS)

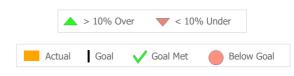
<b>V</b>	Stable Living Situation		24	89%	85%	87%	4%
	Service Utilization						
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
<b>/</b>	Clients Receiving Services		16	100%	90%	97%	10%

Actual % vs Goal %

## **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	62%	96%
On-Time Periodic	Actua	al State Avg
6 Month Updates	73%	85%





<sup>\*</sup> State Avg based on 110 Active Supportive Housing – Scattered Site Programs

Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

#### **Program Activity Discharge Outcomes** Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 16 16 0% Treatment Completed Successfully 100% 75% 64% 25% 🔺 2 Admits Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 1 2 Discharges -50% 0 0% 85% 81% -85% No Re-admit within 30 Days of Discharge **Bed Days** 5,240 5,120 2% Actual % vs Goal % Actual % Goal % State Avg Actual vs Goal Actual Follow-up within 30 Days of Discharge 0 0% 90% 81% -90% **Data Submission Quality Bed Utilization** Data Entry Actual State Avg Valid NOMS Data 99% 99% 12 Months Trend Beds Avg LOS Turnover Actual % Goal % State Avg Actual vs Goal Avg Utilization Rate 90% 90% 16 2,133 days 0.3 91% 0% On-Time Periodic Actual State Avg 90-110% >110% 6 Month Updates 100% 90% Co-occurring Actual State Avg 100% 92% MH Screen Complete SA Screen Complete 100% 90% Diagnosis State Avg Actual 100% 99% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Sep Mar Apr May % Months Submitted > 10% Over < 10% Under</p> Admissions 17% Discharges 8% Actual Goal ✓ Goal Met Below Goal 1 or more Records Submitted to DMHAS \* State Avg based on 30 Active MH Intensive Res. Rehabilitation Programs

**Bed Days** 

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

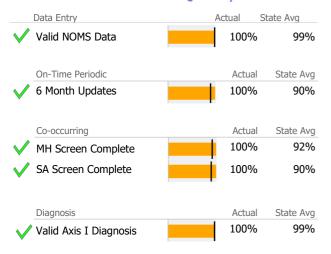
### **Program Activity** Variance % Measure 1 Yr Ago **Unique Clients** 6 0% Admits Discharges

0%

# **Data Submission Quality**

2,190

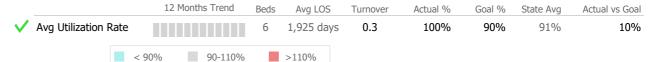
2,190



## **Discharge Outcomes**

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	64%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	81%	N/A
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Follow-up within 30 Days of Discharge		N/A	N/A	90%	81%	N/A

## **Bed Utilization**





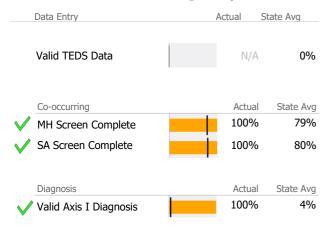


<sup>\*</sup> State Avg based on 30 Active MH Intensive Res. Rehabilitation Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	19	11	73%	•
Admits	8	6	33%	•
Discharges	5	_		

# **Data Submission Quality**



Dati	a Jub		ı to	וויוט		ויו עט	OHU						
	Ju	ıl Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	6												58%
Discharges	i												33%
1 or more Records Submitted to DMHAS													



<sup>\*</sup> State Avg based on 9 Active Peer Based Mentoring Programs

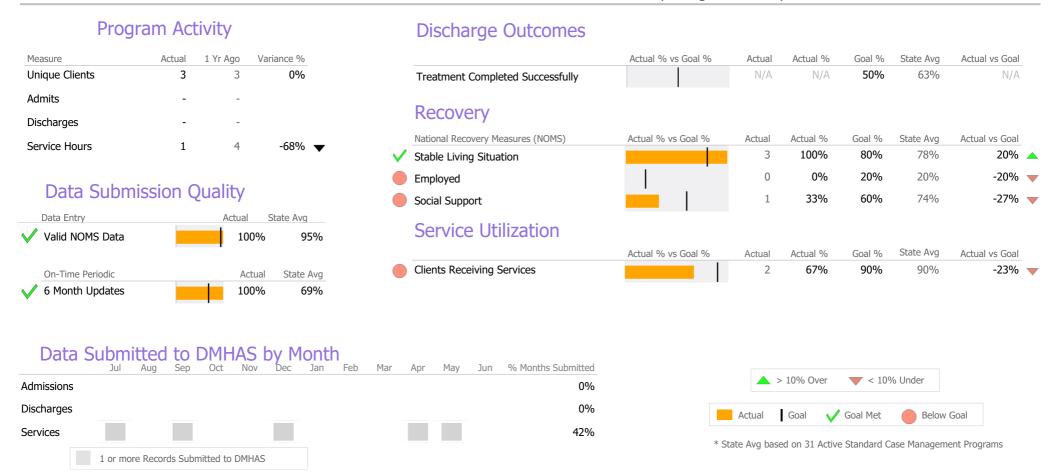
## **State Hospital D/C Behavioral Health**

Community Mental Health Affiliates

Mental Health - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)



### **Supportive Housing 603293**

Community Mental Health Affiliates

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	77	76	1%	
Admits	12	5	140%	•
Discharges	8	11	-27%	•
Service Hours	1,290	1,666	-23%	•

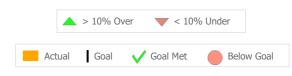
## Recovery

Clients Receiving Services		69	100%	90%	97%	10%
	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Service Utilization						
Stable Living Situation		65	84%	85%	87%	-1%
National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal

## **Data Submission Quality**

Data Entry	Actual	State Avg
Valid NOMS Data	62%	96%
On-Time Periodic	Actua	I State Avg
6 Month Updates	89%	85%





<sup>\*</sup> State Avg based on 110 Active Supportive Housing – Scattered Site Programs

### **Team Time Club House 603-281**

Community Mental Health Affiliates

Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2021 - June 2022 (Data as of Oct 03, 2022)

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	243	184	32%	•
Admits	85	15	467%	•
Discharges	76	22	245%	•
Service Hours	7,984	3,996	100%	•
Social Rehab/PHP/IOP Days	4,923	416	1083%	•

## Service Utilization



		II CCC G				$\sim$ ,	10110						
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or m	nore Recor	ds Sub	mitted to	DMHAS								

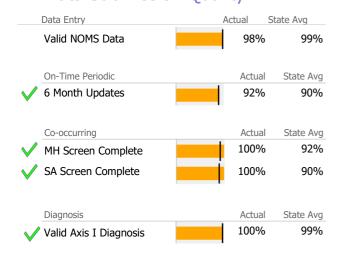


<sup>\*</sup> State Avg based on 34 Active Social Rehabilitation Programs

# **Program Activity**

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	20	35%	•
Admits	12	6	100%	•
Discharges	9	5	80%	•
Bed Days	5,977	5,375	11%	•

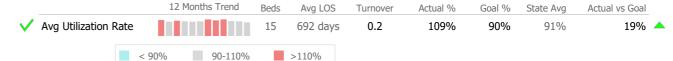
# **Data Submission Quality**



## **Discharge Outcomes**



### **Bed Utilization**







<sup>\*</sup> State Avg based on 30 Active MH Intensive Res. Rehabilitation Programs